PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09/623924

(Column 1) (Column 2)									SMALL I		OR	OTHER SMALL I	
FOR			NUMBER FILED		NUMBER EXTRA		lr	RATE	FEE		RATE	FEE	
BASIC FEE			4							OR		> (4 g	
TOTAL CLAIMS			, ninus 20=			•			X\$ 9=		OR	X\$18=	10
IND	EPENDENT CL	AIMS	ninus 3 = ع ح			•			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	270
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	**		=		X\$ 9=		OR	X\$18=	,
	Independent	•		Minus ***			=		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=	
									TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Colum	n 1)		(9	Column 2)	(Column 3)						
AMENDMENT B		CLAIN REMAIN AFTE AMENDA	IINĢ R		P	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	**		=		X\$ 9=		OR	X\$18=	1
MEN	Independent			Minus		**	=		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							֡֡֞֜֞֜֞֜֞֜֞֜֞֜֜֡֡֡֡֓֓֓֡֡֡֞֜֜֡֡֡֡֡֡֡֡֡֡֡	+130=	 	1	+260=	
									TOTAL	-	OR	TOTAL	
ADDIT FEE													
_	_	(Colum		<u> </u>		(Column 2) HIGHEST	(Column 3	3)		,	٦.		1
AMENDMENT C		REMAII AFTE AMENDI	NING ER			NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus			=		X\$ 9=		OR	X\$18=	1
	Independent	·		Minus	_i_	***	=		X39=		OR	X78=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							L	100		1		
	If the entry in col-	umn 1 ie loe	s than t	the entry in co	lumn	2. write "0" in 4	column 3.		+,130= TOTAL	ļ	OR	TOTA	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	ADDIT. FE	ĒL
"	The "Highest Nu"	mber Previo	ously Pa	aid For" (Total	or In	dependent) is t	he highest num	ber fo	ound in the a	ppropriate b	ox in c	olumn 1.	